

# CAHE JC Critically Appraised Article Summary

## Journal Club Details

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<b>Date of submission</b>	April 2008
<b>Journal Club location</b>	Southern Cross
<b>JC Facilitator</b>	Jane Campbell

## **Clinical Scenario**

What is the impact of professional interpreters on the quality of care of patients with limited English proficiency?

## **Review Question/PICO/PACO**

P: Patients with limited English proficiency

I: Use of Professional medical interpreters

O: Clinical outcomes, patient satisfaction, communication errors and comprehension, utilisation

## **Article/Paper**

Do Professional Interpreters Improve Clinical Care for Patients with Limited English Proficiency? A Systematic Review of the Literature  
Karlner SL, Jacobs EA, Chen AH, Mutha S. *Health Services Research* 2007; 42(2): 727-754.

**Article Methodology:** Systematic review

**Returned JC on:** 29 April 2008

**By CAHE staff member:** Lucylynn Lizarondo

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Ques No.	Yes	Can't Tell	No	Comments
1	✓			Population: Limited English Proficiency patients Intervention: Professional Medical Interpreters Outcomes: Improved Clinical Care in the areas of Communication Errors, and patient comprehension, utilisation, clinical outcomes and satisfaction
2		✓		The authors did not explicitly state which types of studies will be included in the review. However, in the METHODS section, it was implied that any quantitative or qualitative studies that satisfy the criteria will be appraised for methodological quality.
3			✓	The systematic literature search was limited to peer-reviewed articles written in the English Language. PubMed, PsycINFO, Cochrane Library were the only databases searched. Bibliography search in the World Wide Web was done, and from these, additional references were found.
4	✓			Quality of quantitative studies was evaluated in terms of: number of participants, control for confounding variables, and the method for determining group being studied. For qualitative studies, authors have specified that there should be a systematic approach to identifying common themes or issues that arise in the data.  For quantitative data though, it would have been more rigorous if the criteria also assessed for reliability/validity of measures, appropriateness of statistical analysis and other strategies observed by the researchers in minimising bias. For qualitative studies, consistency between the research question and methodology/analysis would be a good point to check.
5		NA		The results of the studies were not combined in this review; a narrative summary was done instead. It was not possible to combine the results statistically, as the studies included in the review is a combination of quantitative and qualitative study designs.
6				Numerical results and statistical tests were presented in tables for each of the quantitative studies included in the review. For qualitative studies with mixed methods, numerical results for each of the studies were likewise presented. For pure qualitative studies, the analytical approaches used were reported.  Cumulative results from all the articles included in the systematic review were presented descriptively.  Bottom-line result: Overall, findings from the studies have found a positive relationship between use of professional interpreters and quality of health care for limited English proficiency patients.
7				Statistical significance and confidence intervals were not used in this systematic review.



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Ques No.	Yes	Can't Tell	No	Comments
8		✓		It is very likely that the study population included patients with varying language proficiency (from very limited proficiency to good) and as such, it may be difficult to fully apply the results of this systematic review because the population cannot be clearly defined.
9	✓			All important outcomes have been considered. It is however, a limitation that cost-benefits of these services cannot be drawn.
10		✓		Weaknesses in the methodological quality of the studies that were included in this systematic review limit the extent to which the effects of medical interpretation on clinical care can be evaluated. Despite this limitation, findings from this study should prompt health care providers to recognize that language barriers can place limited English proficiency patients at a disadvantage.